Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMS control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application of Docket Symbol 98		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL	ENTITY	OR		R THAN ENTITY
	FOR	-	NUMB	ER FILED	NUMB	NUMBER EXTRA		RATE	FEE		RATE	FEE
	IC FEE CFR 1.16(e))						1		\$	OR		.
101	AL CLAIMS CFR 1.16(c))	1	15 minus 20 - ·			,		x s		OR	x s = 4	
IND	EPENDENT CLAIR CFR 1.16(b))	MS	3	minus 3		•		x s =		OR	x s=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							1	+5 =		OR	+8=	
"* If the difference in column 1 is less than zero, enter "0" in column 2."								TOTAL		~~OR	"TOTAL	
CLAIMS AS AMENDED - PART II												
										OR		R THAN
<u> </u>		(Colum		1	(Column 2) HIGHEST	(Column 3)		SMALL	ENTITY	1	SMALL	ENTITY
NT A	7.19.04	REMAI AFT AMEND	NING ER		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	l	RATE	ADDI- TIONAL FEE	İ	RATE	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.15(c))	. 13	5	Minus	- 20	2	1	x s = \		OR	x \$=	
	Independent (37 CFR 1.15(b))	. 3	3	Minus	" 3	9		x \$=		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+\$=		OR	+ \$ =	
								TOTAL ADD'L FEE	• :	OR	TOTAL ADD'L FEE	
	5-2105				(Column 2)	(Column 3)	,			1		
NT B		REMAIL AFTI AMEND	NING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.16(ct)	' /	3	Minus	- 20		1	X \$_ =		OR	x sa_	
	Independent (37 CFR 1.16(b))		3	Minus	" 3	• —		x \$=		-OR	X \$=	
ΑÑ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+\$=	aring in a law state	OR	+\$=	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)												
NTC		CLAI REMAII AFTI AMEND	NING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.18(c))	•		Minus	••	*		x \$=		· OR	x \$=	
AMENDMENT	Independent (37 CFR 1,16(b))	•		Minus	***	c		x 8=		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))							+ \$ =		OR	+ \$=	
										OR	TOTAL ADD'L FEE	
ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need essistance in completing the form, cell 1-800-PTO-9199 and select option 2

Alvin Line